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In re Application of:

Docket No.: 02355.012112

Kiyohide SATOH, ET AL.

Application No.: 09/818,600

Examiner: T. Lau

Filed: March 28, 2001

Group Art Unit: 2863

For: INFORMATION PROCESSING
APPARATUS, MIXED REALITY
PRESENTATION APPARATUS,
METHOD THEREOF, AND
STORAGE MEDIUM

Date: November 7, 2003

Mail Stop Non-fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RECEIVED
NOV 19 2003
TECHNOLOGY CENTER 2800

Sir:

*Transmitted herewith is an Amendment in the above-identified application.

☐ Additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	16	MINUS	24	= 0	x \$9 \$18	\$ 0.00
INDEP. CLAIMS	2	MINUS	3	= 0	x \$40 \$84	\$ 0.00
Fee for Multiple Dependent claims \$135°/\$280						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$ 0.00

☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.

- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Charge \$____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☒ A check in the amount of \$ 420.00 to cover the fee for a TWO month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our Washington, D.C. office by telephone at (202) 530-1010. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Attorney for Applicants
Brian L. Klock
Registration No. 36,570

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